

TRANSVERSE OPTICAL ACCELERATOR AND GENERALIZED OPTICAL

**VORTICES** 

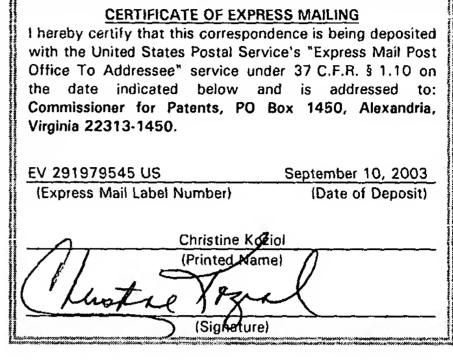
Appl. No.: Unknown

Title:

Filing Date: Unknown

Examiner: Unknown

Art Unit: Unknown



## UTILITY PATENT APPLICATION TRANSMITTAL

Mail Stop PATENT APPLICATION Commissioner for Patents PO Box 1450 'Alexandria, Virginia 22313-1450

Sir:

Transmitted herewith for filing under 37 C.F.R. § 1.53(b) is the nonprovisional utility patent application of:

David G. Grier 1960 North Lincoln Park West Chicago, Illinois 60614

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[X] Applicant claims small entity status under 37 CFR 1.27.

## Enclosed are:

- [X] Specification, Claim(s), and Abstract (58 pages).
- [X] Informal drawings (21 sheets, Figures 1 24).
- [X] Unexecuted Declaration and Power of Attorney (3 pages).
- [ ] Assignment of the invention to U.C. Tech.
- [ ] Assignment Recordation Cover Sheet.
- [ ] Small Entity statement.
- [ ] Request for application not to be published with certification under 35 USC 122(b)(2)(B)(i).
- [ ] Information Disclosure Statement.
- [ ] Form PTO/SB/08 with copies of \_\_\_ listed reference(s).
- [X] Application Data Sheet (37 CFR 1.76).
- [X] Claim for Convention Priority 60/411,132 filed 09/16/02 and 60/451,886 filed 03/04/03.

## The filing fee is calculated below:

	Claims		Included		Extra				
	as Filed		in		Claims				Fee
			Basic				Rate		Totals
			Fee						
Basic Fee							\$750.00		\$750.00
Total Claims:	20	-	20	==	0	X	\$18.00	=	\$0.00
Independ ents:	2	-	3	•	0	X	\$84.00	=	\$0.00
If any Multiple Dependent Claim(s) present:						+	\$280.00	=	\$0.00
Surcharge under 37 CFR 1.16(e) for late filing of Executed Declaration						+	\$130.00	==	\$0.00
						SU	SUBTOTAL:		\$750.00
[ ] Small Entity Fees Apply (subtract ½ of above):							=	\$375.00	
TOTAL FILING FEE:								=	\$375.00

- [X] A check in the amount of \$375.00 to cover the filing fee is enclosed.
- [ ] The required filing fees are not enclosed but will be submitted in response to the Notice to File Missing Parts of Application.
- [X] The Commissioner is hereby authorized to charge any additional fees which may be required regarding this application under 37 C.F.R. §§ 1.16-1.17, or credit any overpayment, to Deposit Account No. 06-1450. Should no proper payment be enclosed herewith, as by a check being in the wrong amount, unsigned, post-dated, otherwise improper or informal or even entirely missing, the Commissioner is authorized to charge the unpaid amount to Deposit Account No. 06-1450.

Please direct all correspondence to the undersigned attorney or agent at the address indicated below.

Respectfully submitted,

Date feeten 10,2003

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By

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